

56/43 \$50-



Trade and Service Marks - Registration

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FilingInOregon.com - Phone: (503) 686-2200

FILED

SEP 26 2013

OREGON
SECRETARY OF STATE

REGISTRY NUMBER:

For office use only

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.
We must release this information to all parties upon request.
Please Type or Print Legibly in Black Ink. Attach additional Sheets if Necessary.

1) CORRESPONDENT NAME:

Peter E. Heuser

MAILING ADDRESS:

c/o Schwabe, Williamson & Wyatt, 1211 SW Fifth Avenue, Suite 1900, Portland, OR 97204

2) APPLICANT'S NAME: (Owner: ☐ Individual or ☒ Entity)All Care In Home Support Services, Inc.

ADDRESS:

2574 West Main Street, Medford, OR 97501

3) IF THE APPLICANT IS AN ENTITY, ENTER THE STATE OF FORMATION:

Nevada

4) IF ENTITY IS A PARTNERSHIP, LIST NAMES OF GENERAL PARTNERS:

5) DESCRIPTION OF TRADE OR SERVICE MARK: (include all words, designs and borders that comprise the mark) (Attach additional pages if needed.)

ALL CARE6) SPECIMEN OF MARK IS REQUIRED: ☒ Attach a drawing or photocopy of the mark as it is actually used to this application.

7) GOODS OR SERVICES WITH WHICH THE MARK IS USED: (Examples of goods are pizzas, shirts; examples of services are serving food and selling clothing.)

Providing in-home health care services, advising patients as to insurance coverage, medication, nutrition, lifestyle and providing hospice care.

8) EXPLAIN MODE OR MANNER IN WHICH THE MARK IS USED: (Example: on goods, tags, labels, containers, etc.)

Website, brochures, business cards, letterhead, advertisements, signs, and other printed materials.

9) CLASS NUMBER(S) OF GOODS OR SERVICES: (See form 290-a)

142

10) DATE MARK WAS FIRST USED ANYWHERE BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:

12/00/1994

11) DATE MARK WAS FIRST USED IN OREGON BY APPLICANT OR APPLICANT'S PREDECESSOR IN INTEREST:

12/00/1994

12) EXECUTION:

I, the applicant, own the mark, the mark is in use, and no other person has registered the mark with the federal government or in Oregon or has the right to use the mark or a mark that so resembles the mark as to be likely to cause confusion or mistake or deceive when applied to the goods or services of the other person. I declare under penalties of perjury that this application is true, correct and complete.

(If applicant is an entity, a member of a firm, officer of the corporation, officer of the limited liability company, or officer of an association must sign.)

Signature:

Title:

Date:

September 25, 2013

CONTACT NAME: (To resolve questions with this filing.)

Terri Hanson

PHONE NO

503-22

290 - Tm



42957

FEES

Registration Fee \$50
Examination Fee \$50

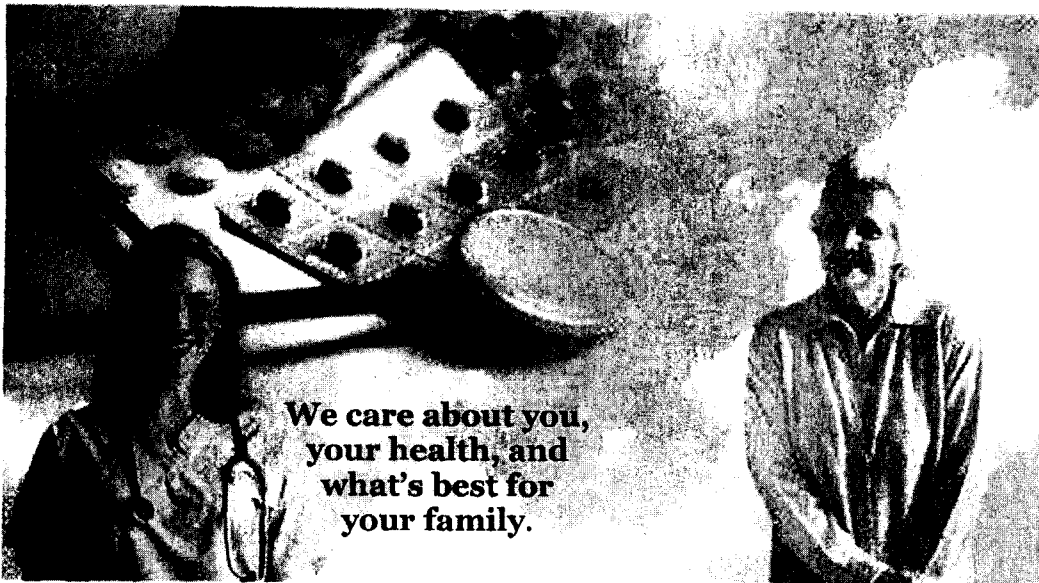
Fees are non-refundable. Please make check payable to "Corporation Division."

All Care

Sep 25 13 04:20p

Home

Page 1 of 2



Medford (541) 857-9195
Ashland (541) 482-9755

We can provide the assistance you need.

[Home](#) [Our Services](#) [Request Info](#) [About Us](#) [Testimonials](#) [Contact Us](#)

[Home](#)



There's no place like home, especially when you're not feeling well. Our home care and office staff help you live safely at home with expert and responsive care.

Whether you need someone for just a few days or a more supportive long-term arrangement, we can help. Our homecare experts will work with you and your doctor to come up with a schedule that's just right for you.

We can help you stop worrying and focus on your health. Call us today to set up a time to discuss your specific needs.

We provide service to Southern Oregon, Medford and surrounding areas of Jackson and Josephine Counties.

Oregon Medicaid Certified

All Care Home Care Support Services, Inc.
Medford (541) 857-9195
Ashland (541) 482-9755

7686

<http://allcareonline.homestead.com/>

Exhibit A
9/25/2013
Page 2 of 2